

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 10/820,369 Confirmation No.: 7648
 Applicant(s): Kyoji SKIGUCHI Group Art Unit: 2873
 Examiner: Brandi N. THOMAS
 Filed: April 8, 2004 Customer No.: 27123
 For: OPHTHALMOLOGIC IMAGE PROCESSING APPARATUS

AMENDMENT FEE TRANSMITTAL

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

- ☐ No additional fee is required.
- ☒ The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest No. Covered by Previous Payments	Extra	Rate	Additional Fee
Total Claims*	13	20	0	\$50.00/ \$25.00	\$
Independent Claims	4	3	1	\$200.00/ \$100.00	\$ 200
Multiple Dependent Claims	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$360.00 to additional fee (\$180.00 for small entity).				\$
TOTAL					\$ 200

*Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. §1.75(c).

- ☐ Small entity status is or has been claimed.
Reduced Fees Under 37 C.F.R. §1.9(f) paid herewith \$_____
- ☐ _____ Pages Sequence Listing
- ☐ _____ Computer disk(s) containing substitute Sequence Listing
- ☐ Statement under 37 C.F.R. §1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.
- ☐ A check in the amount of \$_____ to cover the filing fee is attached.
- ☐ Charge fee to Deposit Account No. **13-4500**, Order No. _____.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for filing this amendment, including all fees pursuant to 37 CFR §1.17 for its timely consideration, or credit any overpayment to Deposit Account No. **13-4500**, Order No. 1232-5368.

Respectfully submitted,
MORGAN & FINNEGAN, L.L.P.

Dated: 9/25/07

By:



Allen Chein
Registration No. 57,451

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